

# Exhibit E



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December 5, 2022

**Via Email Only**

Tracy L. Hoffman  
Senior Associate General Counsel  
UnitedHealthcare  
Tracy.Hoffman@uhc.com

**Re: Participant: Joe Spinks**  
**Plan: GFL Health and Welfare Benefit Plan**  
**Provider: Sugar Land ENT& Sleep Center, PA**  
**Claims: DE90455712**  
**DOS: 12/01/2021**  
**Amount: \$24594.00**

Dear Ms. Hoffman:

Thank you for your November 25, 2022 email regarding the above referenced claim. In response to your email, and in the interest of making a good faith effort to resolve this matter expeditiously, I have withheld the filing of a civil action in this matter. However, it is imperative that your client once and for all address this claim in an appropriate and timely manner, which has not occurred as of the date of this letter.

First, it is clear that neither UnitedHealthcare ("UHC") or GFL Environmental ("GFL") has bothered to read the correspondence that my client previously sent regarding this claim because neither has responded substantively. Other than point the finger at each other, neither UHC nor GFL has substantively responded to my client's notice of fiduciary breaches related to the adverse benefit determination.

As my client has made clear repeatedly, Sugar Land ENT & Sleep Center, PA ("SLENT") has been provided with a valid and fully executed and enforceable legal Assignment of Benefits ("AOB") by the patient, and is therefore the legally designated beneficiary of the GFL Health and Welfare Benefit Plan ("Plan"). At all times during the production of medical records and the appeal's process, UHC and GFL have been aware of SLENT's standing as an AOB or, at a minimum, a Designated Authorized Representative ("DAR") of Mr. Spinks, as these forms and designations were included in all correspondence to UHC and GFL.

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GFL has **expressly** asserted in writing that UHC is the Plan Fiduciary for the Plan. If in fact this is the case, then UHC, not GFL, is legally responsible for assuring that my client's claim as a designated beneficiary of the Plan is administered in an appropriate and timely manner. Accordingly, UHC is subject to the beneficiary's right to pursue a judicial review under Section 502(a) of ERISA. Your email appears to confirm that position. If I am incorrect in this regard, please direct us to the proper agent for service of an action under Section 502(a).

Finally, your email of November 25, 2022 also references an "operative participation agreement" and requests that we provide you with "supporting provisions" from that agreement. In that regard, I would first indicate that my client has already provided the Plan with **ALL** such "supporting provisions" with the original claims and appeals. I would refer you to all such documents served on your client.

Second, I am hereby formally requesting that you provide me with a copy of the Administrative Services Agreement ("ASA") between UHC and GFL (formerly WCA Management, L.P.) for the 2021 plan year. We are concerned language may exist that rewards UHC for "savings" it generates for the Plan through its denial efforts. These provisions could be construed as self-dealing; a prohibited transaction under ERISA and at a minimum, can affect deference provided by the court.

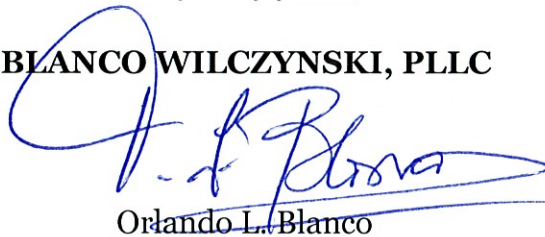
While we wish to work in good faith to resolve this egregious denial of benefits clearly owed by the Plan, neither GFL or UHC have addressed the substantive issues raised in my client's previous correspondence, including the Appeals filed in this matter.

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I look forward to your timely response to this letter and receipt of the ASA.

Very truly yours,

**BLANCO WILCZYNSKI, PLLC**



Orlando L. Blanco

OLB/mlb  
Enclosures

cc: Dr. James J. Ludwick, M.D., Sugar Land ENT & Sleep Center, PA